

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	70385	
O.I.P.E. CLASSIFIER		49	2/26/99
FORMALITY REVIEW	OR	72121	3-3-99

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) ... Canceled
 ÷ Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Best Available Copy

Claim	Final	Original	Date
1	✓	✓	✓
2	N	N	N
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
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29	✓	✓	✓
30	✓	✓	✓
31	N	N	N
32	✓	✓	✓
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46	✓	✓	✓
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50	✓	✓	✓

Claim	Final	Original	Date
51	✓	✓	✓
52	✓	✓	✓
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here